

**APPLICATION DATA SHEET**

**APPLICATION INFORMATION**

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	
Title::	METHOD AND DEVICE FOR FILLING THE DOSING CHAMBER OF AN INHALER FOR THE FIRST TIME
Attorney Docket Number::	1/1615-NS
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	4a
Total Drawing Sheets::	4
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**APPLICANT INFORMATION**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Johannes
Family Name::	GESER
City of Residence::	Ingelheim am Rhein
Country of Residence::	Germany
Street of mailing address::	Vorderer Boehl 23
City of mailing address::	Ingelheim am Rhein
Country of mailing address::	Germany

**Postal or Zip Code of mailing address::** 55218

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Germany  
**Status::** Full Capacity  
**Given Name::** Georg  
**Family Name::** BOECK  
**City of Residence::** Laupheim  
**Country of Residence::** Germany  
**Street of mailing address::** Ahornweg 48  
**City of mailing address::** Laupheim  
**Country of mailing address::** Germany  
**Postal or Zip Code of mailing address::** 88471

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Germany  
**Status::** Full Capacity  
**Given Name::** Michael  
**Family Name::** SPALLEK  
**City of Residence::** Ingelheim am Rhein  
**Country of Residence::** Germany  
**Street of mailing address::** Stauferring 40  
**City of mailing address::** Ingelheim am Rhein  
**Country of mailing address::** Germany  
**Postal or Zip Code of mailing address::** 55218

**CORRESPONDENCE INFORMATION**

**Correspondence Customer Number::** 28501

**REPRESENTATIVE INFORMATION**

**Representative Customer Number::** 28501

**DOMESTIC PRIORITY INFORMATION**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This application	National Stage of	PCT/E2004/014726	12/27/04

**FOREIGN PRIORITY INFORMATION**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
DE	10361735	12/29/03	yes

**ASSIGNEE INFORMATION****Assignee name::****Street of mailing address::****City of mailing address::****Country of mailing address::****Postal or Zip Code of mailing address::**

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